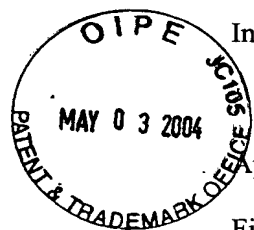


IN THE UNITED STATES PATENT AND TRADEMARK OFFICE



In re Patent Application of:

Atsuo Yamada, et al.

Application No. 10/003,455

Filed: October 31, 2001

For: FUEL CELL AND FUEL CELL SYSTEMS

) Group Art Unit: 1745

) Examiner: Dove, Tracy Mae

) CERTIFICATE OF MAILING

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) *Suzarah A. Maguigad*  
) Suzarah A. Maguigad

Mail Stop Non-Fee Amendment  
Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

**RESPONSE TO JANUARY 29, 2004 OFFICE ACTION**

Dear Sir:

This is a Response to the Office Action mailed January 29, 2004. In view of the amendments and remarks made herein, Applicants respectfully request reconsideration and allowance of the pending claims.

05/04/2004 ZJUHR1 00000111 10003455

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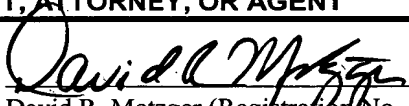
258.00 0P




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<b>TRANSMITTAL FORM</b> (to be used for all correspondence after initial filing)	<b>Application Number</b>	<b>10/003,455</b>	
	<b>Filing Date</b>	<b>October 31, 2001</b>	
	<b>First Named Inventor</b>	<b>Atsuo Yamada</b>	
	<b>Group Art Unit</b>	<b>1745</b>	
	<b>Examiner Name</b>	<b>Tracy Mae Dove</b>	
<b>Total Number of Pages in This Submission</b>	<b>16</b>	<b>Attorney Docket Number</b>	<b>09792909-5268</b>

<b>ENCLOSURES (check all that apply)</b>						
<input checked="" type="checkbox"/> Transmitted herewith is Response to January 29, 2004 Office Action						
<input checked="" type="checkbox"/> The fee has been calculated as shown below:						
(1) FOR	(2) CLAIMS REMAINING AFTER AMENDMENT	(3)	(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	(6) RATE	(7) ADDITIONAL FEE
TOTAL CLAIMS	8	-	15	0	<input type="checkbox"/> x \$9.00 <input checked="" type="checkbox"/> x \$18.00	\$0.00
INDEPENDENT CLAIMS	6	-	3	3	<input type="checkbox"/> x \$43.00 <input checked="" type="checkbox"/> x \$86.00	\$258.00
APPLICATION AMENDED TO CONTAIN ANY MULTIPLE DEPENDENT CLAIMS NOT PREVIOUSLY PAID FOR.				<input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	<input type="checkbox"/> x \$145.00 <input checked="" type="checkbox"/> x \$290.00 ONE TIME	\$0.00
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT						\$258.00
<input type="checkbox"/> Applicant petitions the Commissioner for Patents to extend the time for responding to the Office Action dated _____ by <u>one</u> month(s) for a fee of \$ _____ so that the period for response is extended to _____ under 37 C.F.R. § 1.321.						
<input type="checkbox"/> The amount of \$ _____ for the Terminal Disclaimer under 37 C.F.R. § 1.321 is included in the enclosed check.						
<input type="checkbox"/> The amount of \$ _____ for the Amendment under 37 C.F.R. § 1.312(b) is included in the enclosed check.						
<input checked="" type="checkbox"/> The enclosed credit card payment form to charge the amount of <u>\$258.00</u> covers the total claim fee and other applicable fees.						
<input checked="" type="checkbox"/> The Commissioner is hereby authorized to charge the extension fee and any additional fees which may be required, or to credit any overpayment to Account No. 19-3140. A duplicate of this sheet is enclosed.						

<b>SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT</b>	
14. <input checked="" type="checkbox"/> Customer No 026263	
Dated: April 29, 2004	David R. Metzger (Registration No. 32,919)

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Dated: April 29, 2003	 Suzarah A. Maguigad